

Disclosure Report Cover

Amendment

☐ Yes☒ No

Use this form for general report and committee information, must be signed and submitted along with other detailed forms.

Do not use this form to update information

1. Committee Information

a. Full Name

Durham The Next Generation

c. ID Number

b. Mailing Address (include City, State and Zip Code)

P.O. Box 110443

Research Triangle Park, NC 27709-0443

d. Date Filed

01/30/09

e. Phone Number

919-544-3366

2. Report Year

2008

3. Period Start Date (mm/dd/yy)

12/09/08

4. Period End Date
(mm/dd/yy)

12/31/08

5. Treasurer Full Name

Julie Elizabeth Omohundro

6. Type of Committee (Check One)

- ☐ Candidate Campaign ☐ Party
☒ PAC ☐ Referendum
☐ Independent ☐ Joint Fundraiser
☐ Expenditure ☐ Legal Expense Fund

7. Type of Fund (if applicable, check one)

- ☐ "Booster Fund"
☐ Building Fund

☐ Other:

9. Type of Report (check only one type of report from one category)

Municipal

- ☐ Organizational
☐ Thirty-five day

- ☐ Pre-primary
☐ Pre-election
☐ Pre-runoff
☐ Semi-annual
☐ Mid Year
☐ Year End
☐ Final
☐ Special

State/County

- ☐ Organizational
☐ Quarterly

- ☐ First
☐ Second
☐ Third
☐ Fourth
☐ Semi-annual
☐ Mid Year
☒ Year End
☐ Final
☐ Special

Referendum

- ☐ Organizational
☐ Pre-referendum

- ☐ Final
☐ Supplemental Final
☐ Annual
☐ Special

10. Special Report Name

8. Number of Fundraisers this Report

0

11. Account Information

a. Financial Institution Full Name

Branch Banking & Trust (BB&T)

b. Purpose

To pay for
PAC expenses
and
contribute
to campaigns

c. Account Code

001

d. Period Begin Balance

\$ 0.00

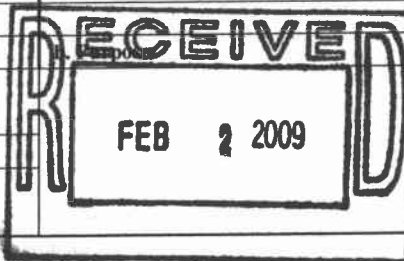
11. Account Information

a. Financial Institution Full Name

c. Account Code

d. Period Begin Balance

\$



CERTIFICATION

I certify that the Committee or Fund is in compliance with all applicable provisions of Article 22A, 22B, & 22D-22M of Chapter 163 of the NC General Statutes and that no funds are commingled with prohibited or other non-disclosed funds. I further certify that this report is complete, true and correct and that I have been trained by the NC State Board of Elections.

Julie Omohundro

Printed Name of Signer

Signature of Appointed Treasurer

12/08/2008 01/30/08 jw

Date

FOR OFFICE USE ONLY

Date Received:

2/2/2009

Employee:

MP

Date Postmarked:

1/30/2009

Employee:

MP

Date Scanned:

Employee:

Date Data Entered:

Employee:

Delivery Method

- ☐ Normal Mail
☒ Registered Mail
☐ Hand Delivered
☐ Electronically Filed
☐ Signer has not received mandatory training

Please Note: This form cannot be used to amend committee information such as the committee address, treasurer, assistant treasurer, custodian of books information, or account information.

You must amend the Statement of Organization (CRO-2100A-E) to make committee changes.

Detailed Summary

Amendment

☐ Yes ☒ No

Use this form to summarize all disclosure reporting forms and to total monetary information.

1. Committee Full Name (and Fund if applicable)		2. Type of Report		3. ID Number	
Durham The Next Generation		Semi-Annual Year End			
Start of Election Cycle:		January 1,		2008	
		Total this Reporting Period		Total this Election Cycle	
4) Cash on Hand at Start		\$ 0.00		\$ 0.00	
RECEIPTS					
5) Aggregated Contributions from Individuals		<i>(CRO-1205)</i>		\$ 0.00	
6) Contributions from Individuals		<i>(CRO-1210)</i>		\$ 1500.00	
7) Contributions from Political Party Committees		<i>(CRO-1220)</i>		\$ 0.00	
8) Contributions from Other Political Committees		<i>(CRO-1230)</i>		\$ 0.00	
9) Loan Proceeds		<i>(CRO-1410)</i>		\$ 0.00	
10) Refunds/Reimbursements To the Committee		<i>(CRO-1240)</i>		\$ 35.00	
11) Other Receipt Sources					
11a) Interest on Bank Accounts		<i>(CRO-1250)</i>		\$ 0.00	
11b) Contributions from Not-for-Profit Organizations		<i>(CRO-1250)</i>		\$ 0.00	
11c) Outside Sources of Income		<i>(CRO-1250)</i>		\$ 0.00	
11d) Legal Expense Fund – Other Sources		<i>(CRO-1270)</i>		\$ 0.00	
11 e) Exempt Purchase Price Sales		<i>(CRO-1265)</i>		\$ 0.00	
12) TOTAL RECEIPTS <i>(Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d and 11e)</i>				\$ 1535.00	
EXPENDITURES					
13) Disbursements					
13a) Operating Expenditures		<i>(CRO-1310)</i>		\$ 1212.00	
13b) Contributions to Candidates/Political Committees		<i>(CRO-1310)</i>		\$ 0.00	
13c) Coordinated Party Expenditures		<i>(CRO-1310)</i>		\$ 0.00	
14) Aggregated Non-Media Expenditures		<i>(CRO-1315)</i>		\$ 0.00	
15) Loan Repayments		<i>(CRO-1440)</i>		\$ 0.00	
16) Refunds/Reimbursements From the Committee		<i>(CRO-1320)</i>		\$ 0.00	
17) In-Kind Contributions		<i>(CRO-1510)</i>		\$ 0.00	
18) TOTAL EXPENDITURES <i>(Add lines 13a, 13b, 13c, 14, 15, 16 and 17)</i>				\$ 1212.00	
19) Cash on Hand at End <i>(Add lines 4 and 12 together, then subtract line 18)</i>				\$ 323.00	
ADDITIONAL INFORMATION					
20) Non-Monetary Gifts Given to Other Committees		<i>(CRO-1330)</i>		\$ 0.00	
21) Outstanding Loans (incl. ones from other campaigns)		<i>(CRO-1430)</i>		\$ 0.00	
22) Debts and Obligations owed By the Committee		<i>(CRO-1610)</i>		\$ 0.00	
23) Debts and Obligations owed To the Committee		<i>(CRO-1620)</i>		\$ 0.00	
24) Account Transfers Within the Committee		<i>(CRO-1720)</i>		\$ 0.00	
25) Administrative Support		<i>(CRO-1710)</i>		\$ 0.00	
26) Forgiven Loans		<i>(CRO-1440)</i>		\$ 0.00	
27) 48-Hour Notice Reports Sum		<i>(CRO-2200)</i>		\$ 0.00	
28) Contributions to be Refunded		<i>(CRO-1215)</i>		\$ 0.00	

Contributions from Individuals

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☐ Yes ☒ No

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

1. Committee Full Name (and Fund if applicable)					2. ID Number	
Durham The Next Generation						
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Julie Omohundro 1227 Seaton Road, #34 Durham, NC 27713			Self-Employed		PAC Treasurer	
			c. Employer's Name/Specific Field			
			Research & Development			
					e. Election Sum to Date	
					\$ 1500.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	001	Check	--	12/15/08	\$ 1500.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
			c. Employer's Name/Specific Field			
					e. Election Sum to Date	
					\$	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
			c. Employer's Name/Specific Field			
					e. Election Sum to Date	
					\$	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 1500.00	
5. Total of ALL CRO-1210 Pages					\$ 1500.00	
(This line must be on line 6 of Detailed Summary Page CRO-1100)						



Disbursements

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Amendment

☐ Yes ☒ No

Use this form to report expenditures from the committee for; operating expenses, contributions to candidate/political committees and coordinated party expenditures

1. Committee Full Name (and Fund if applicable) Durham The Next Generation					2. ID Number	
3. Type of Disbursement <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i>						
<input checked="" type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures						
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) Graphics Ink 4040 South Alston Avenue Durham, NC 27713 919-544-5060			b. Coordinated Committee Name		d. Comments	
			c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		e. Election Sum to Date \$ 524.00	
f. Account Code 001	g. Form of Payment Debit Card	h. Purpose Code A	i. Date (mm/dd/yyyy) 12/19/08	j. Amount \$524.00	k. Required Remarks Design Logo and Display Ad	
				\$		
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) Independent Weekly 302 East Pettigrew, Suite 300 Durham, NC 27701 919-286-1972			b. Coordinated Committee Name		d. Comments	
			c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		e. Election Sum to Date \$ 653.00	
f. Account Code 001	g. Form of Payment Debit Card	h. Purpose Code A	i. Date (mm/dd/yyyy) 12/19/08	j. Amount \$653.00	k. Required Remarks Print ad	
				\$		
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) BB&T 4717 Hope Valley Road Durham, NC 27707 919-687-7206			b. Coordinated Committee Name		d. Comments	
			c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		e. Election Sum to Date \$ 35.00	
f. Account Code 001	g. Form of Payment Bank Draft	h. Purpose Code O	i. Date (mm/dd/yyyy) 12/19/09	j. Amount \$35.00	k. Required Remarks Overdraft fee	
				\$		
5. Total only this Page					\$ 1212.00	
6. Total of ALL CRO-1310 Pages <i>(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)</i> <i>(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)</i> <i>(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)</i>					\$ 1212.00	
7. Purpose Codes (List detailed expenditure code in (h.) above)						
A* - Media		B* - Printing		C* - Fundraising		D - To Another Candidate
E - Salaries		F* - Equipment		G - Political Party		H* - Holding Public Office Expenses
I - Postage		J - Penalties		K* - Office Expenses		O* - Other
* Codes require detailed explanation in required remarks field (k)						

Refunds/Reimbursements To the Committee

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Amendment

☐ Yes ☒ No

Use this form to report refunds received by the committee or reimbursements for a previous expenditure.

1. Committee Full Name (and Fund if applicable)				2. ID Number	
Durham The Next Generation					
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			d. Type of Committee		g. Comments
BB&T 4717 Hope Valley Road Durham, NC 27707 919-687-7206			<input type="checkbox"/> Candidate <input type="checkbox"/> PAC		Bank refunded overdraft fee
			<input type="checkbox"/> Referendum <input type="checkbox"/> Party		
			e. Level Registered (Specify)		h. Original Expenditure Date
			<input type="checkbox"/> Federal <input type="checkbox"/> County:		12/19/08
			<input type="checkbox"/> State <input type="checkbox"/> Municipality:		
					i. Original Expenditure Amt
					\$ 35.00
b. Job Title/Profession		c. Employer's Name/Specific Field		f. Purpose	
n/a (business)		Bank		O	
				j. Election Sum to Date	
				\$ 35.00	
k. Account Code	l. Form of Payment	m. In-Kind Description		n. Date (mm/dd/yyyy)	o. Amount
001	Bank Draft			12/23/08	\$ 35.00
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			d. Type of Committee		g. Comments
			<input type="checkbox"/> Candidate <input type="checkbox"/> PAC		
			<input type="checkbox"/> Referendum <input type="checkbox"/> Party		
			e. Level Registered (Specify)		h. Original Expenditure Date
			<input type="checkbox"/> Federal <input type="checkbox"/> County:		
			<input type="checkbox"/> State <input type="checkbox"/> Municipality:		
					i. Original Expenditure Amt
					\$
b. Job Title/Profession		c. Employer's Name/Specific Field		f. Purpose	
				j. Election Sum to Date	
				\$	
k. Account Code	l. Form of Payment	m. In-Kind Description		n. Date (mm/dd/yyyy)	o. Amount
					\$
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)			d. Type of Committee		g. Comments
			<input type="checkbox"/> Candidate <input type="checkbox"/> PAC		
			<input type="checkbox"/> Referendum <input type="checkbox"/> Party		
			e. Level Registered (Specify)		h. Original Expenditure Date
			<input type="checkbox"/> Federal <input type="checkbox"/> County:		
			<input type="checkbox"/> State <input type="checkbox"/> Municipality:		
					i. Original Expenditure Amt
					\$
b. Job Title/Profession		c. Employer's Name/Specific Field		f. Purpose	
				j. Election Sum to Date	
				\$	
k. Account Code	l. Form of Payment	m. In-Kind Description		n. Date (mm/dd/yyyy)	o. Amount
					\$
4. Total only this Page					\$ 35.00
5. Total of ALL CRO-1240 Pages (This line must be on line 10 of Detailed Summary Page CRO-1100)					\$ 35.00

